

UNITED STATES DISTRICT COURT  
SOUTHERN DISTRICT OF NEW YORK

Monty Ray Souther

Write the full name of each plaintiff.

VA. China  
RUSSIAN -against-

DONALD TRUMP  
SEREBIN OPERATIVES

JOANNE C SMITH  
CATHOLIC Church

Write the full name of each defendant. If you need more space, please write "see attached" in the space above and attach an additional sheet of paper with the full list of names. The names listed above must be identical to those contained in Section II.

CV  
(Include case number if one has been assigned)

COMPLAINT

Do you want a jury trial?

☐ Yes ☐ No

RECEIVED  
SOUTHERN DISTRICT OF NEW YORK  
2021 AUG 19 PM 12:01

NOTICE

The public can access electronic court files. For privacy and security reasons, papers filed with the court should therefore *not* contain: an individual's full social security number or full birth date; the full name of a person known to be a minor; or a complete financial account number. A filing may include *only*: the last four digits of a social security number; the year of an individual's birth; a minor's initials; and the last four digits of a financial account number. See Federal Rule of Civil Procedure 5.2.

## I. BASIS FOR JURISDICTION

Federal courts are courts of limited jurisdiction (limited power). Generally, only two types of cases can be heard in federal court: cases involving a federal question and cases involving diversity of citizenship of the parties. Under 28 U.S.C. § 1331, a case arising under the United States Constitution or federal laws or treaties is a federal question case. Under 28 U.S.C. § 1332, a case in which a citizen of one State sues a citizen of another State or nation, and the amount in controversy is more than \$75,000, is a diversity case. In a diversity case, no defendant may be a citizen of the same State as any plaintiff.

What is the basis for federal-court jurisdiction in your case?

☒ Federal Question

☐ Diversity of Citizenship

### A. If you checked Federal Question

Which of your federal constitutional or federal statutory rights have been violated?

Freedom of Religion - Phone  
tapped - GPS tampered with

### B. If you checked Diversity of Citizenship

#### 1. Citizenship of the parties

Of what State is each party a citizen?

The plaintiff, \_\_\_\_\_, is a citizen of the State of \_\_\_\_\_  
(Plaintiff's name)

\_\_\_\_\_  
(State in which the person resides and intends to remain.)

or, if not lawfully admitted for permanent residence in the United States, a citizen or subject of the foreign state of \_\_\_\_\_

\_\_\_\_\_  
If more than one plaintiff is named in the complaint, attach additional pages providing information for each additional plaintiff.

If the defendant is an individual:

The defendant, \_\_\_\_\_, is a citizen of the State of  
(Defendant's name)

or, if not lawfully admitted for permanent residence in the United States, a citizen or subject of the foreign state of \_\_\_\_\_.

If the defendant is a corporation:

The defendant, Donda Trump, is incorporated under the laws of  
the State of NY, Washington FL

and has its principal place of business in the State of NY, FL

or is incorporated under the laws of (foreign state) \_\_\_\_\_

and has its principal place of business in US

If more than one defendant is named in the complaint, attach additional pages providing information for each additional defendant.

## II. PARTIES

### A. Plaintiff Information

Provide the following information for each plaintiff named in the complaint. Attach additional pages if needed.

~~Monty RAY~~  
First Name Middle Initial Last Name  
~~Burg~~ Burgo CT  
Street Address  
~~HAVERLOCK~~ HAVERLOCK NC  
County, City State Zip Code  
828 366-8458 Rush 5118@live.com  
Telephone Number Email Address (if available)

Mosha Souther1@9mail

Monty RAY Souther  
Homeless

## B. Defendant Information

(SEE ATTACHED)

To the best of your ability, provide addresses where each defendant may be served. If the correct information is not provided, it could delay or prevent service of the complaint on the defendant. Make sure that the defendants listed below are the same as those listed in the caption. Attach additional pages if needed.

Defendant 1:

Donald TRUMP

First Name

Last Name

Ex President

Current Job Title (or other identifying information)

NY TRUMP TOWER

Current Work Address (or other address where defendant may be served)

County, City

State

Zip Code

Defendant 2:

CATHOLIC CHURCH

First Name

Last Name

CATHOLIC CHURCH

Current Job Title (or other identifying information)

Current Work Address (or other address where defendant may be served)

County, City

State

Zip Code

Defendant 3:

RUSSIA

First Name

Last Name

Current Job Title (or other identifying information)

Current Work Address (or other address where defendant may be served)

County, City

State

Zip Code

**B. Defendant Information**

To the best of your ability, provide addresses where each defendant may be served. If the correct information is not provided, it could delay or prevent service of the complaint on the defendant. Make sure that the defendants listed below are the same as those listed in the caption. Attach additional pages if needed.

Defendant 1:

*Bill & Hillary Clinton S*

First Name

Last Name

Current Job Title (or other identifying information)

Current Work Address (or other address where defendant may be served)

County, City

State

Zip Code

Defendant 2:

First Name

Last Name

*STATE DEPT*

Current Job Title (or other identifying information)

Current Work Address (or other address where defendant may be served)

County, City

State

Zip Code

Defendant 3:

First Name

Last Name

Current Job Title (or other identifying information)

Current Work Address (or other address where defendant may be served)

County, City

State

Zip Code

*Monty Southern*

Defendant

China

Russia

CATHOLIC CHURCH

JOANNE Smith

VA

SerBIN OPERATIVES / RUSSIA

DONALD TRUMP



Defendant 4:

First Name

Last Name

V.A.

Current Job Title (or other identifying information)

Current Work Address (or other address where defendant may be served)

County, City

State

Zip Code

## III. STATEMENT OF CLAIM

Place(s) of occurrence:

FOR OVER 2 YEARS

Date(s) of occurrence:

~~the~~ person or persons unknown

## FACTS:

State here briefly the FACTS that support your case. Describe what happened, how you were harmed, and what each defendant personally did or failed to do that harmed you. Attach additional pages if needed.

to ME HAVE PLACED A Audio Implant  
to control Behavior against my will  
there are people who know of what  
I speak - I HAVE BEEN COGNE starting

I'm A 100% PAV who suffers from PTSD  
Along with CRIME pain as a result  
the TRUMPSTER HAVE HARASSED  
ME

Doctors at the VA told ME  
I have a cancer that there is NO KNOWN  
cure I went to a DR in OR who  
let student doctor use ME A LAB RAT  
then he told ME THAT "you owe  
it to us to let us work on you"

**INJURIES:**

If you were injured as a result of these actions, describe your injuries and what medical treatment, if any, you required and received.

I can't sleep - constant Reuniny  
they use phsic TetneXNS  
USE MED MARIJUANA

I HAVE pain every day FOR 20+ years  
I HAVE Foot pain that's constant

**IV. RELIEF**

State briefly what money damages or other relief you want the court to order.

I want my PASSPORT so I  
can go HOME to ISRAEL



**V. PLAINTIFF'S CERTIFICATION AND WARNINGS**

By signing below, I certify to the best of my knowledge, information, and belief that: (1) the complaint is not being presented for an improper purpose (such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation); (2) the claims are supported by existing law or by a nonfrivolous argument to change existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Federal Rule of Civil Procedure 11.

I agree to notify the Clerk's Office in writing of any changes to my mailing address. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

Each Plaintiff must sign and date the complaint. Attach additional pages if necessary. If seeking to proceed without prepayment of fees, each plaintiff must also submit an IFP application.

Aug 19 2021  
 Dated \_\_\_\_\_  
Monty R South  
 First Name Middle Initial Last Name  
 Plaintiff's Signature  
 Street Address \_\_\_\_\_  
Homeless  
 County, City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
 Telephone Number \_\_\_\_\_ Email Address (if available) MOSHA South@gnas

I have read the Pro Se (Nonprisoner) Consent to Receive Documents Electronically:

☐ Yes ☐ No

If you do consent to receive documents electronically, submit the completed form with your complaint. If you do not consent, please do not attach the form.